



FRISCO PD JUNIOR POLICE ACADEMY

The Frisco Police Department is offering young people the opportunity to experience law enforcement first hand through the Junior High Police Academy. Students will learn the basic functions of a working police department, as well as have a chance to explore the idea of a law enforcement career. The Junior High Police Academies will be held at **Wester Middle School (12293 Shepherds Hill Ln., Frisco, TX)**. Each academy is one week long and there are seven to choose from. The academy hours are from 8:30am-3:00pm unless otherwise stated. There is **no cost** to students who wish to attend the academy. ****Please circle preferred dates and indicate your first, second and third choice of dates to attend the Academy. Students will be enrolled on a first come first serve basis. Please return completed applications to your child's School Resource Officer at their school.***

2010 POLICE ACADEMY DATES:

☐ PLEASE CHECK BOX IF YOU ATTENDED LAST YEAR

JUNE 14th – 18th

JUNE 21st – 25th

JUNE 28th – July 2nd

JULY 6th – 9th

JULY 12th – 16th

JULY 19th – 23rd

JULY 26th – 30th

***NOTE: The week of July 6 - 9 the Academy will be from Tuesday – Friday. All other weeks are Monday – Friday.**

APPLICATION

PLEASE PRINT

DATE _____

NAME _____ AGE _____ M / F _____

ADDRESS _____ CELL/HOME _____

SCHOOL _____ CURRENT GRADE LEVEL ☐ 6 ☐ 7

HOBBIES/INTERESTS _____

PARENT/GAURDIAN _____

ADDRESS _____ HOME PHONE _____

CELL PHONE _____ EMAIL _____

EMPLOYER _____ WORK PHONE _____

EMERGENCY CONTACT _____

ADDRESS _____ PHONE _____

MEDICAL INFORMATION

*PLEASE PRINT

DATE: _____

NAME OF APPLICANT: _____

PLEASE LIST ANY MEDICAL CONDITIONS THE APPLICANT HAS:

LIST ALL MEDICATIONS TAKEN BY APPLICANT:

IS APPLICANT REQUIRED TO TAKE MEDICATION DURING THE HOURS OF 8:00AM
AND 3:00 PM YES / NO

IF YES, WHAT IS THE MEDICATION/DOSAGE?

IS APPLICANT ABLE TO ADMINISTER MEDICATION? YES / NO

IF NO EXPLAIN _____

NOTE: All medical emergencies will be treated as such and will be attended to by the Frisco Fire
Department as deemed necessary by academy personnel, instructors, or coordinators.

PHYSICIAN _____ PHONE _____

DENTIST _____ PHONE _____

RELEASE OF LIABILITY WAIVER

I, _____, hereby authorize my son/daughter to participate in the Frisco Police Department's Junior Police Academy Summer Camp Program.

I, _____, also give my permission for my son/daughter to be transported to and from scheduled and specified events by the following modes of transportation: 1) Vehicles owned and operated by the City of Frisco, or 2) Privately owned vehicles.

I, _____, fully understand and my son/daughter fully understands that participation and transportation during the Frisco Police Department's Junior High Police Academy Summer Camp Program could result in bodily injury, serious bodily injury, illness or death. Although I fully appreciate these risks, I desire my child to participate in the Frisco Police Department's Junior High Police Summer Camp Program without regard of the consequences. I, the undersigned, assume full and complete responsibility for any accident, injury or illness and or activity that may occur to my child as a result of their participation. I agree to and hereby release, hold harmless, and waive all claims that I, or my child may have against the Frisco Police Department, City of Frisco, Frisco I.S.D., or any of its employees, agents, sponsors, representatives, or volunteers from all legal injury, illness or death and or activities arising from or connected in any manner to my child's participation in the Frisco Police Department's Junior High Police Academy Summer Camp Program, including but not limited to liability, damages, legal fees and or costs caused by or related to the negligence or the intentional act of the Frisco Police Department, City of Frisco, Frisco I.S.D., or anyone of its employees, agents, sponsors, representatives, or volunteers in whole or in part. This release shall be binding on my heirs, legatees, administrators, and assigns.

PARENT/GAURDIAN _____ **DATE** _____

CADET SIGNATURE _____ **DATE** _____

RULES OF BEHAVIOR

- 1) Cadets will be expected to maintain a mature and respectful attitude towards classmates and instructors.
- 2) Students will adhere to a strict "no touch" policy, much like those of school rules.
- 3) Cadets are expected to keep up with their personal belongings and should limit what they bring to class (notebooks, lunches, etc). Students will need to bring a pen or pencil and paper.
- 4) Cell phones, MP3 Players/IPods WILL NOT be allowed
- 5) If possible, girls should refrain from bringing purses to class.
- 6) Cadets will be expected to participate in all class activities (unless student is unable. Instructors should be given notice of cadet's physical limitations prior to the start of the academy).

Violations of the rules of behavior may result in removal from the class for the day. Subsequent violations may result in expulsion from the academy.

CADET SIGNATURE _____ **DATE** _____

PARENT/GAURDIAN _____ **DATE** _____